

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/198,698	11/24/98	356	2877	MIT8003L

APPLICANT

GUY W. CARLISLE, BEDFORD, MA.

CONTINUING DOMESTIC DATA***
VERIFIED

P.U.C. none

371 (NAT'L STAGE) DATA***
VERIFIED

P.U.C. none

FOREIGN APPLICATIONS***
VERIFIED

P.U.C. none

***** SMALL ENTITY *****

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 8	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>P.U.C.</u> Examiner's Initials _____ Initials _____					

ADDRESS

SAMUELS GAUTHIER & STEVENS
225 FRANKLIN STREET STE 3300
BOSTON MA 02110

TITLE

IMAGING SYSTEM WITH A TWO-AXIS-GIMBAL MIRROR SCAN SYSTEM APPARATUS
AND METHOD

FILING FEE RECEIVED \$380	FEES: Authority has been given in Page: No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-------------------------------------	---	---